

Purpose

This guideline describes the considerations to be made regarding movement of blood components between hospital departments or to other hospital sites. It also describes the agreed method to be used if this is deemed appropriate.

Transfer of blood between departments and to other hospital sites:

Transferring within hospital

Once blood components have been issued to a satellite blood fridge or clinical area they should not be transferred to other locations within the hospital except when the patient is undergoing urgent transfusion during transfer. All red cells must be transfused within 4 hours of removal from temperature-controlled storage.

Transfer of blood to another site

It is rarely necessary to transfer blood with a patient. However, if the patient is going to be transferred to another hospital with blood, the hospital transfusion laboratory of the sending hospital must be informed immediately. Laboratory staff will prepare blood for transit and will seal it in a validated transit box along with accompanying documentation and marked with the time of dispatch. This transit box seal should not be broken unless the contents are required for transfusion.

Wards / departments must not send previously issued blood in a box that has already been issued from the transfusion laboratory.

In general, no more than two units are required to travel with a patient and, if crossmatched blood is not already available, un-crossmatched group O red cells will be issued to avoid delay in initiating the transfer.

Please note: Blood components must be checked by two members of staff prior to administration. However, during inter-hospital transfer there may be a need for a single practitioner to undertake the appropriate safety checks prior to transfusion in an emergency. This is only permissible if the practitioner is registered, is up-to-date with Learnbloodtransfusion *Safe transfusion practice* education and follows all other correct administration checks as detailed in [Blood Transfusion Procedure: Administration of blood components](#). This is the only circumstance when a single person administration check is permitted.

Receiving patients who have been transferred with blood

If blood arrives with a transferred patient this should be sent to the receiving hospital transfusion laboratory without delay. If urgent transfusion is required this can go ahead as long as the blood has been transported correctly in an approved cooled transit box with appropriate documentation, ensuring the usual patient identification and safety checks have been performed. If the transferred blood has time-expired or has been incorrectly packaged, it must not be used and the receiving hospital transfusion laboratory informed.